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Applicant Authority Type:: Inventor  
 Primary Citizenship Country:: USA  
 Status: Full Capacity  
 Given Name:: Michael  
 Family Name:: Spaid  
 City of Residence:: Sunnyvale  
 State or Province of Residence:: CA  
 Country of Residence:: USA  
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 City of mailing address:: Sunnyvale  
 State or Province of mailing address:: CA  
 Postal or Zip Code of mailing address:: 94086

Applicant Authority Type:: Inventor  
 Primary Citizenship Country:: USA  
 Status: Full Capacity  
 Given Name:: Richard  
 Middle Name:: J.  
 Family Name:: McReynolds  
 City of Residence:: San Jose  
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 Country of Residence:: USA  
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 City of mailing address:: San Jose  
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#### CORRESPONDENCE INFORMATION

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#### REPRESENTATIVE INFORMATION

Representative Customer Number :: 021569

#### DOMESTIC PRIORITY INFORMATION

Application::	Continuity Type::	Parent Application::	Parent Filing Date
This Application	Non-Provisional of	60/269,174	02/15/01

## ASSIGNEE INFORMATION

Assignee name::	Caliper Technologies Corp.
Street of mailing address::	605 Fairchild Drive
City of mailing address::	Mountain View
State or Province of mailing address::	CA
Postal or Zip Code of mailing address::	94043